

**Department of Health and Human Services  
Health Care Financing Administration  
Operational Policy Letter #112  
OPL2000.112**

**Date:** January 24, 2000

**Subject:** Accessibility Aids and Other Items and Services Offered by a  
Medicare+Choice Organization (M+CO)

**Effective Date:** Upon Issuance. This OPL is a new statement of policy.

**Issues:**

Will HCFA permit an M+CO to include, as part of an Medicare+Choice (M+C) plan, in home accessibility aids for those members with disabilities (e.g., safety hand rails for bathrooms and wheelchair ramps?)

Will HCFA permit an M+CO to offer in home accessibility aids for some (but not all) members of an M+C plan?

Does this policy extend to other items and services offered by an M+CO?

**Discussion:**

**Note:** This OPL is applicable to only those items and services not covered under original Medicare. Any item or service covered under original Medicare must be included in an M+C plan offered by an M+CO.

An M+CO may offer in home accessibility aids provided certain conditions are met. The M+CO may choose one of two options regarding how these aids will be offered.

Option 1: The M+CO offers the item or service in its ACR as part of an M+C plan.

Option 2: The M+CO offers the item or service but does not include it in its ACR as part of an M+C plan.

**Option 1: The M+CO offers the item or service in its ACR as part of an M+C plan.**

To be offered as part of an M+C plan, the following conditions must be met:

The offering of in home accessibility aids must be consistent with the definition of a benefit found in 42CFR422.2. The definition of a benefit includes:

1. Health care items or services that are intended to maintain or improve the health status of enrollees;
2. The M+CO must incur a cost or liability directly related to the item or service and not just an administrative processing cost; and
3. The item or service is submitted and approved through the ACR/Benefit process.

The benefit must be classified as an additional benefit, mandatory supplemental benefit, or optional supplemental benefit; and,

Each M+CO must establish “reasonableness and appropriateness” standards for the provision of in home accessibility aids and must apply those standards equitably to all enrollees within the M+C plan in determining who is in need of a particular item or service. If the benefit is offered as an optional supplemental benefit, the M+CO must set those standards equitably to all enrollees within the plan who purchase the option when determining who is in need of such item or service.

**Option 2: The M+CO offers the item or service but does not include it in its ACR as part of an M+C plan.**

If the M+CO wants to offer the item or service to some (but not all) members of an M+C plan, the item or service cannot be offered as a part of an M+C plan. The “uniformity of benefits” requirement in §1854(c) of the Social Security Act stipulates that all benefits included in the M+C plan (i.e., those included in the ACR) must be available to all plan enrollees. Additionally, optional supplemental benefits must be available to all Medicare enrollees purchasing that option.

This does not preclude an M+CO from providing a benefit to some (but not all) M+C plan members if the following conditions are met:

The benefit must be free of any cost to the enrollee;

The benefit may not be used to discourage enrollment or retention in M+C plans;

The cost of the benefit may not be included in the ACR; and,

The benefit may not be included in any M+C plan marketing materials.

In response to the third issue outlined at the start of this OPL, the policies explained in both options extend to other items and services (beyond accessibility aids) offered by an M+CO provided all other benefit package policies are met and the item or service is not covered under original Medicare.

**Contact: HCFA Regional Office Managed Care Staff.**

**This OPL was prepared by the Center for Health Plans and Providers.**